

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	10-2-60
FORMALITY REVIEW	<i>CA</i>	69916	11/22/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	0
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12	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet her

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BEST AVAILABLE COPY